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WOUND OF THE PALMAR ARCH—LIGATURE OF THE ULNAR AND RADIAL ARTERIES.

To the Editor of the "Boston Medical and Surgical Journal."

SIR,—As all surgical cases which have presented difficulty are more instructive than those where none has been experienced, I will give you the history of one which may be useful to some of your readers, or at least interesting, not from its formidable character at first, but its obstinacy in yielding to treatment. The superficial palmar arch, although so much exposed, is not wounded as often as we should expect, and when so, the bleeding is not unfrequently easily checked, either from the arch being unusually small, there being an anomalous distribution, a thing very common here, the artery cut completely off, or compression easily made. The following demanded almost all the resources of surgery, and for a time presented a threatening aspect.

I was called to Bloomfield, to assist Dr. White in restraining the hæmorrhage from a wound of Mr. W., a young and healthy farmer, who had cut himself the week previously with a large jack knife while the blade was directed towards the left hand, the incision being very oblique from below upwards on the ulnar side, to a depth which severed the tendons of the two smaller fingers and the ulnar nerve. This made a stiff, deep flap, one and a half inch long, with its ulnar extremity cut completely out; it is important to bear this in mind, as it influenced the decision as respects plugging in the first instance. Immediately after its infliction, Mr. W. rode in haste several miles to the house of Dr. White, where he fainted, the blood having continued to flow profusely the whole distance, notwithstanding his efforts to restrain it. Dr. White, thinking that external compression might succeed, and the arteries not being easily seized, carefully replaced the flap, and made firm pressure over the wound, and as no hæmorrhage returned for a week, hoped that union had taken place by the first intention. But the blood burst out again, and was restrained by the thumb of the patient until I saw him, on the 17th of Nov., 1846. Mr. W. had lost blood enough to render him quite sallow, and had been much reduced in strength. A handkerchief garrot having been applied, an examination of the wound was made, ending as such generally do under the circumstances; no artery could be found, but there was a quagmire of blood and tissue saturated, so that nothing could be discovered, while on loosening the garrot the blood spirted out as from the mouth of a watering

pot. The question then arose, whether it was best to tampon the wound. Our principal objections were, that if we did, the incision was so long and oblique it would require a very large compress to be effectual; that if crowded between the ends of the tendons, their union must be prevented; and again, a week having elapsed, and the extremities of the nerves severed, already inflamed and very painful, they would be greatly irritated, and dangerous symptoms, and perhaps tetanus, might ensue. Pressure over the ulnar artery seeming to restrain the bleeding, it was thought best to ligature this, as the operation would be but trifling compared with any other procedure. It being evening, this was postponed until next day for the benefit of sunlight, and the wound temporarily closed by pressure. The blood, however, burst out early next morning, and the operation was immediately performed. The ulnar artery was secured without difficulty above the wrist, and pulsation ceased at the wound. A compress was accurately laid over the palmar cut, and the patient left with proper instructions. This did not prevent a fresh occurrence of bleeding, which took place next day as furiously as ever. Pressure over the radial artery now appeared to be sufficient to check this, for the original wound was freely opened, and there was no bleeding, although attempts were made to provoke it, if it was so disposed. This must have been owing, however, not to pressure on the artery, but probably to some clot, as events showed. The arm was a good deal swollen, the sutures applied two days before had torn out, allowing a free discharge of sanious pus, and an abscess was forming toward the back of the ulnar side of the arm from infiltration; the patient was restless and feverish, with a total loss of appetite.

Notwithstanding these unpropitious appearances, it was thought best to tie the radial artery, which was done on the 21st, the wounds lightly dressed and kept wet with lead water: a compress over the threatened abscess prevented diffusion of pus, and small doses of antimony were administered. It was found, however, as respects the hæmorrhage, we should probably have more work to do, for as soon as the ligature was drawn, the artery in the lower part of the wound pulsated as strongly below the knot as above. This no one had anticipated, and one of the physicians thought that the ligature had not been tied tight, or that there was some other artery in the neighborhood. To prevent any mistake, another was applied, but it was evident that the palmar part of the radial artery was beating nearly as hard as ever, by the pulsations which could be detected under the extensors of the thumb, or with but slightly diminished force, and, as was to be expected, a recurrence of hæmorrhage took place the next day. Found on the 22d, that the wound over the ulnar artery had entirely changed its character; the pus secreted was healthy, all symptoms had improved, and Mr. W. had a pretty good appetite. Still the hæmorrhage was every moment threatening to return, although the great channels of supply had been cut off. The space between the two wounds in the wrist, occupied by the tendons, pulsated so strongly that it was evident the inosculating branches of the interosseous artery had enlarged with great rapidity, and the bleeding and throbbing in the

palm proved a full supply. The external part of the palmar wound had now begun to heal; therefore a piece of pressed sponge was laid flat over this and tightly secured with a compress, and strips of wood tied transversely over the hand, which proved an effectual though temporary restraint, while attention was being paid to the wounds in the wrist, to expedite their cure preparatory to any further steps it might be deemed best to take.

On the 29th, a week after this last attack, Dr. W. raised the edge of the sponge while examining the hand, and there was another gush of arterial blood, which was restrained as formerly by replacing the compress.

On the 30th, two weeks after my first visit, and three after the injury, the inflammation having subsided and the ligatures come off, I went prepared either to tie the brachial artery or to use the sponge if practicable. Upon removing the dressings, it was found that the outer part of the wound had completely and firmly healed, but at its inner end was a dark spot, the size of a half dime and black, presenting the appearance of an old pistol bullet wound, every throb elevating the clot, and stopping the orifice and the surrounding parts. Here was evidently an aneurism, and in a favorable condition for direct compression. The cavity was cleared out, pieces of pressed sponge cut of various sizes, and each secured with a strong thread. The smallest of these was thrust to the bottom of the orifice, and then a larger placed on top, and then another, until the hole was completely filled. One piece was in particular placed as nearly as possible over the artery which was in the wall of the aneurism, and not at its bottom; the whole was then firmly secured as before. The pain attending this was severe, much more so than the cutting of the previous operations, and it was increased by the swelling of the tampon; but as it seemed the only hope, excepting the actual cautery or ligature of the brachial artery, the patient submitted to it courageously, being willing to endure anything to be relieved of a difficulty which had troubled him for three weeks, almost banishing sleep, from his fear of hæmorrhage during the night. In three or four days he was relieved by a relaxation of the pressure, when there gushed up from the bottom of the wound, around the sponge, perfectly healthy pus, and entirely free from blood. The artery was now probably closed, but as Mr. W. was comfortable, the plugs were not touched for a fortnight after their insertion, when the small portions of sponge were gradually withdrawn by their threads in their regular order, leaving a wound granulating well from the bottom, and which has healed up, leaving merely a depression. The fingers still continue somewhat stiff, though he has begun to work, and he will undoubtedly have as useful a hand as the other, except what he may suffer in consequence of the division of the nerves. The ligature of the radial artery was high above any branch which goes from it to the hand, and the supply of blood could have come from the interosseous only.

The question in debate among surgeons has been, whether in cases where the ligature cannot be applied in the wound, or pressure methodically made, it is best to tie the artery which seems to supply the blood most

directly, trusting the rest to pressure, or at once ligate the brachial artery. Liston is strongly in favor of the latter method, but Velpeau and the weight of authority are in favor of the former. It certainly does seem most philosophical to tie the arteries nearest the wound, but experience must be our safest guide. It has happened, time and again, that the ligature of one and pressure over the other or the wound, has sufficed, while the ligature on the brachial has failed, as stated by S. Cooper. This case may help settle the question. It will at least prove the value of pressed sponge, and the confidence to be placed in it where its services are wanted.

I have twice before this been called to treat wounds of the palmar arch. Once between the thumb and fore-finger with a knife, and once near the annular ligament on the radial side by a hog's tusk. Both of these yielded to pressure carefully applied, though there was in each several attacks of hæmorrhage, requiring a re-application of the pads. The arteries were not tied.

P. W. ELLSWORTH.

Hartford, Ct., March 20th, 1847.

LETTER FROM PARIS—ETHEREAL INHALATION IN INSANITY AND OBSTETRICS.

To the Editor of the Boston Medical and Surgical Journal.

DEAR SIR,—In my last letter, which was written on the first day of February, I gave you some account of the manner in which the ethereal inhalation was received in Paris, and of the views which the surgeons entertained of its importance. At the time that letter was dated, a kind of insane ethereal furor had taken possession of the French medical mind, and various new applications were being made with the ether for the purpose of testing its powers.

During the past month the enthusiasm which had hitherto prevailed in regard to the ether, has gradually subsided, and the subject is now becoming one of cool and scientific consideration. The inhalation of ether still maintains its credit in Paris, as a nullifier of sensibility in surgical operations, and it has recently been employed by the physicians of the hospitals as a therapeutic agent. Viewing the ether as an excitant and as a sedative, the physiologist has thought that when inhaled into the lungs it might prove useful in certain forms of insanity, and in the department of obstetrics; and many experiments with it have been performed in accordance with these views. As a therapeutic agent in certain forms of insanity, the inhalation of ether has thus far proved quite unsatisfactory. M. Moreau, Physician to the Bicetre Hospital, has made a number of his patients inhale the ether, and reports the experiments as unfortunate. One of his patients who was subject to periodical alienation, inhaled the ether during the interval of sanity, and was immediately seized with delirium and uncontrollable insanity. The experiment was then tried on an epileptic patient, and with like unfortunate consequences. The patient was, after a few minutes, thrown into violent convulsions, resembling those of tetanus. The effects of the ethereal inhalation were equally unsatisfactory in a number of other patients at this Hospital, so that its agency in

relieving insanity, epilepsy and other affections of the nervous system, is considered injurious rather than useful.

As it regards the obstetric art, the utility of the ether inhalation seems to promise more favorable results. In my last communication I stated that a woman had been delivered by the forceps while under the influence of the ether, and without manifesting any signs of suffering. The success which attended this case has induced practitioners to make other experiments—a few of which I will notice. The ether was given to a young woman, aged 18 years, who was in labor with her first child. The labor had been protracted and very painful, and it was decided that the child could not be born without the aid of instruments. The patient was prevailed upon to take the ether until its full effects were produced, and the woman rendered insensible. The forceps were then applied, and the child delivered, while the mother was in a state of insensibility. Another woman has been delivered by the forceps while under the influence of the ether, who, although she exhibited much agitation and uttered many cries during the operation, declared, on recovering her consciousness, that she was not sensible of having experienced the least pain. In this instance the ether did not seem to destroy sensibility so completely as to render the patient entirely insensible to the pain of the operation, as is proved by the agitation she exhibited, and the cries she uttered—while the intellectual powers, or at least the power of memory, were perfectly annulled by it. This is an interesting fact for the consideration of the physiologist.

But the inhalation of ether by parturient women has not in every instance proved altogether as harmless as in the cases I have mentioned. In one instance it produced sudden and alarming cerebral congestion; the eyes of the patient became injected to so great a degree that the blood seemed almost to gush out from them; the tongue became swollen, and a frothy saliva flowed freely from the mouth. This condition of things lasted three or four minutes, during which period the uterus contracted powerfully several times, and the patient showed no signs of suffering from it; and when she recovered her consciousness, she had no recollection of the occurrence of uterine pains. An interesting and a valuable observation was made in this case in relation to the uterine life of the fœtus. While the patient was in the state of insensibility, the fœtal heart was noticed, and found to beat vigorously and regularly 160 times in a minute. A short time after the patient recovered her consciousness, the fœtal heart beat 125 times in a minute. In consequence of the cerebral congestion which followed the inhalation of the ether in this case, the labor was no longer interfered with, and the child was born by the natural process. Hitherto no particular notice had been taken of the action of the abdominal muscles during the uterine contractions in women who had taken the ether. In two cases special attention was directed to this point, and it was observed that in these the abdominal muscles were in action during the contractions of the womb. Both of these women were delivered while under the influence of the ether, and the children were born into the world healthy and vigorous. In regard to the actual con-

traction of the voluntary muscles of the abdomen in these cases, there may be, I think, some doubt. It is possible, and it seems to me very probable, that the accoucheur was mistaken in his observation. I am inclined to the opinion that the action of the abdominal muscles was apparent only, and not real, and that the movements of the abdominal walls which the observer noticed, were caused by the action of the uterus. It is certain that under other circumstances the voluntary muscles, so far as they have been noticed, are deprived of their contractile powers by the inhalation of ether, and I can conceive of no reason why the abdominal muscles should escape the influence of the ether during uterine labor.

After diligent inquiry, I cannot learn that any obstetric patient who has inhaled the ether during labor, has suffered any very serious accidents. With two exceptions, all those, I believe, who have inhaled the ether, have recovered, and have done well. Two of them who were subjects of the experiments had puerperal peritonitis, and died. Both of these patients were delivered by the forceps while under the effects of the ether. On *post-mortem* examination nothing was found except the lesions common to the puerperal fever. It should be mentioned that this disease prevailed in the wards in which these women were confined, and it is probable, therefore, that their malady was the result of contagion.

If any conclusions can be drawn from the few observations that have been made in relation to the usefulness of ether in the practice of midwifery, they are the following. First, The inhalation of ether is capable of overcoming or nullifying the natural or physiological pain of labor. Second, In doing this, it does not destroy the contractility of the uterus. Third, It facilitates the process of labor by depriving the muscles connected with the perineum of their power of resistance. And, lastly, It has not appeared to act in an unfavorable manner on the life and health of the child. These inferences, however, should, from the fewness of the observations on which they are founded, be received with great caution. As yet, experiments have not been sufficiently numerous to authorize a course of practice; and M. Dubois, who is one of the most distinguished accoucheurs of France, has expressed the opinion that the ethereal inhalation in the art of midwifery, will be resorted to only in extreme cases, as instruments are.

Yours, &c.

Paris, March 1st, 1847.

F. WILLIS FISHER.

DR. CLARKE'S INTRODUCTORY LECTURE.

[An abstract, only, is here given, which, however, will exhibit the lecturer's views and capability. The discourse was given at the opening course of lectures in the Boylston Medical School in this city, and was alluded to on a former occasion.]

In the first part of his address, the speaker gave an account of the customary medical course of the United States. This he considered to be deficient in many important particulars. It lacked system and thoroughness. For two thirds of the year, the student is allowed to study

as fancy or inclination may direct ; and for the remaining one third, he is crammed to surfeiting with lectures. In the office of his instructor he pursues a desultory, unmethodical method of study, and enjoys but few or no opportunities for the rigorous observation of disease, or for daily and systematic instruction. These evils are only partially obviated in the method of teaching adopted in the private medical schools of our large towns and cities. In such schools a certain course of study is marked out and followed, but this course is completed in one year. In the succeeding year, the same course is repeated, and so on. By this arrangement the advanced student and the beginner are placed in the same class, and thus both are fettered—the one impeded and the other hurried in his studies. Dr. C. thought that these disadvantages might be obviated by a more thorough course of instruction, and a different arrangement of studies.

He then pointed out the amount of knowledge—the degree of judgment and patient investigation which are necessary to the *scientific* treatment of disease, even in its simplest forms. Diagnosis, he regarded as an essential prerequisite to therapeutics ; the former demanding an intimate knowledge of the boundless field of physiology, of anatomy, pathology and etiology, as well as a perfect appreciation of the signs and symptoms of disease ; and the latter requiring an acquaintance with *all the substances* in nature, capable of exerting a curative influence on the human economy. Every practitioner, who would exercise his profession with satisfaction to himself and advantage to his patient, should be thoroughly possessed of all that is at present known in these branches. He should be especially imbued with the true spirit of impartial and philosophic investigation, and taught, amidst the complex relations—the subtle and varying changes of the human system—to be skilful alike in the discovery of truth and the detection of error. Our present system of medical education is not calculated to contribute to this result.

The speaker also alluded to the difference between Europe and America, in the degree and amount of preparation required for the practice of physic, and regretted that in this respect we allowed our transatlantic brethren to excel us. He hoped that this would not be the case long, but that the profession in this country would emulate the example set them across the water.

He concluded his address by stating that the Boylston Medical School was an humble attempt at a more thorough and satisfactory course of professional study. Its instructors were confident of the adoption and ultimate prevalence of their views, though not inclined to be too sanguine of the success of their individual efforts. For the better attainment of the object of the school, they had declined to receive any compensation for their labor, and to expend every cent received from tuition in procuring means of illustration, and facilities for study. By so doing they hoped to obtain a cabinet of specimens, with plates, models and preparations, that would greatly assist the student in his investigations, and be an important means of giving him an accurate knowledge of the groundwork—of the essential elements of his profession.

THE BRONCHITIS WAR—DR. REESE AGAIN.

[Communicated for the Boston Med. and Surg. Journal.]

To accuse another of gross plagiarism is no trivial matter, especially where the accusation is without any foundation in truth, and therefore it need not excite surprise that I should follow Dr. Reese in his multitudinous windings, turnings and evolutions, which would certainly do credit to a harlequin.

The charge that I conceal my name, if there is any concealment about it, for I have never imposed any secrecy upon either the editor or publisher of this Journal, comes with a bad grace from Dr. Reese, for he commenced this "warfare" by assailing Dr. Green *anonymously* in the columns of a *newspaper*, a species of huckstering which even Brandreth or "Dr. Dow" might well be ashamed of; and if he ultimately *gave* his name, it was only through the *compulsion of John Doe*, of legal notoriety, who is sometimes a terror to evil doers. With regard to myself, I have only to say, that inasmuch as my opponent has set all decency at defiance, I cannot so far compromise my feeling of self-respect, as to couple my name with his in this or any other controversy.

Dr. Reese endeavors to make it appear, by *inuendo*, that I am not a resident of Boston, notwithstanding my communications have been dated Boston, which fact, it seems to me, should have been conclusive with regard to residence. It has been truly said by the old bard, however, that "suspicion ever haunts the guilty mind;" and it will always be found, that those who are distinguished for their *moral obliquity*, are very apt to question the *honesty* and *purity* of others. Be it known, therefore, to those whom it may concern, that I *am* a resident of Boston, and that I have attempted a vindication of Dr. Green without even an intimate personal acquaintance with that gentleman. Introducing myself to him during a brief sojourn in New York, he received me with that kindness and courtesy which distinguishes the true gentleman, and learning that I felt an interest in his peculiar treatment of laryngeal diseases, he generously afforded me every facility, during my brief stay in the city, for making myself acquainted with his method of cauterizing the larynx. I need not say that I was deeply interested in having ocular demonstration of the feasibility of the operation, especially when many distinguished physicians, and some profound anatomists, were emphatically declaring it to be physiologically impossible. Hence I was quite willing to "take a hint" from Dr. Green, and even to receive his "instructions," for that physician who imagines himself to be so *wise* that he does not need any further *knowledge*, is not only a *drone* in his profession, but is unfit for the high and responsible duties which he has assumed.

In conversation with Dr. Green, I alluded very naturally to the first communication which had appeared in the Boston Medical and Surgical Journal in relation to his book, and which was then understood to be from the pen of Dr. Reese; but Dr. Green did not intimate the slightest wish that any notice should be taken of it, but on the contrary, appeared quite indifferent with regard to the assaults which had been made upon him by Dr.

Reese, and expressed the opinion that they would not do him any injury when it was known who was their author. Indeed, while Dr. Green has the encomiums of such men as Professors Mott and Revere, who are ever ready to ascribe to others the merit which is their due, it is not to be supposed that he would be much troubled with the "barking" of his present adversary, to borrow a choice word from the vocabulary of Dr. Reese. What I have written, therefore, I have done from a sense of duty alone, for I regarded it as a most extraordinary piece of injustice on the part of Dr. Reese, to send communications from New York for publication in Boston, having no other object, apparently, than that of doing injury to the professional standing of Dr. Green. My only desire has been to overturn falsehood, and subvert petty malice, and when Dr. Reese, in allusion to myself, speaks of the "galled jade wincing," which appears to be one of his favorite quotations, judging from the frequency with which he uses it, I beg to assure him, in the same homely phraseology, that he has "got the saddle on the wrong horse."

The "plain tale" of Dr. Reese, as he terms it, in which he makes a final spasmodic effort to free himself from his present deplorable dilemma, is about as luminous as an Egyptian fog; and we confess that the extraordinary skill which he has displayed in the use of dates, leaves the question *very nicely balanced*, as to whether he read Dr. Green's book or not, before "reviewing" it in this Journal. Be this as it may, however, the "review" of it which he published *anonymously* in the New York newspaper, out of a deep regard for the interests of the profession, was written without having given the book a *perusal*, as he himself acknowledges; and if the newspaper review was thus written, it would not be putting one's credulity very much to the stretch, to imagine that the first review in this Journal was also thus written, for the two reviews are as much alike as the two Dromios. It seems to us, therefore, that the "plain tale" is only making "confusion worse confounded."

We are referred to the introduction of Dr. Green's work, which is not inappropriate. Dr. Reese would fain make it appear that it is all a fiction that Dr. G. had been in the habit of cauterizing the larynx as early as 1838, and accuses him of deception in saying that the work of Trousseau and Belloc was not published in this country until 1841. Let us examine these charges briefly, for a brief examination is all that is required. By reference to said introduction, which Dr. Reese has made authority, it will be seen that in September, 1840, Dr. Green brought before the New York Medical and Surgical Society, the subject of the treatment of diseases of the larynx, by means of topical applications to the lining membrane of that cavity—exhibiting the appropriate instruments for that purpose, and reporting fifteen cases of laryngeal and bronchial disease which, during the *two preceding years*, he had managed successfully by this method of treatment. Hence, the reader will perceive that Dr. Green commenced his peculiar practice at the period which he has specified, and as a reference to the proceedings of the Society named will undoubtedly show. The dark and malicious insinuations of Dr. Reese, therefore, will weigh nothing in opposition to sober facts. By the way, where was our valiant

critic in 1840, when Dr. Green made the report to which I have just alluded? Had he been enabled, by his *extensive* reading and research, to have detected the treasonable, the worse than gunpowder plot of Dr. Green, at that early period, he might, by putting in requisition a few anonymous newspaper "reviews," have saved the present unmeasured effusion of ink, and received the universal plaudits of an "outraged profession," for his watchfulness and fidelity.

We need not trouble ourself much about Dr. Johnson's reviews of the work of Trousseau and Belloc, which were written previous to 1838. Of course, he spoke of that work as he found it, and as it contained no directions for the certain and systematic introduction of medicinal solutions into the laryngeal cavity, it is very natural, in his conversation with Dr. Green in 1838, that he should have suggested the propriety of some different mode of operating, whereby applications could be made below the epiglottis with unvarying certainty.

Dr. Green is quoted as saying, that he disclaims all indebtedness to Trousseau and Belloc, and why should he not have said so? As we stated in a previous communication, he has quoted freely from Trousseau and Belloc, showing their special mode of treating diseases of the larynx by topical remedies, and then he describes the method which he himself has long pursued; and these two methods are by no means identical, the latter only being certain and systematic. Give, then, to Dr. Green the credit which is his due; and if he has devised a simple method of introducing medicinal solutions into the larynx, with unvarying certainty, which is not identical with that of Trousseau and Belloc, it is a matter of no importance when these gentlemen made their report to the Royal Academy of Sciences, when their book was first translated and published in this country, when Dr. Johnson wrote his notices in the *Medico-Chirurgical Review*, nor when Dr. Green first commenced his peculiar treatment of laryngeal diseases.

Dr. Reese finds it necessary to deny most strenuously that the work of Trousseau and Belloc did not assume a book form in this country until 1841, as we have stated, and as Dr. Green has stated in his introduction. Now what is the fact? "Our library" is not quite equal to that of the Vatican, nevertheless we have the English translation of Trousseau and Belloc in our "collection," in book form, and we find that it was published in Philadelphia by Carey & Hart, in 1841—that is, if the title-page is any indication whatever as to the time when a book was published. Even the translator's preface is only dated September, 1839, after which time we presume it appeared in *Dunglison's Library or Medical Journal*, although it is not apparent from the volume itself, that it was *ever* published in any other form, excepting the original French. Admitting, for the sake of argument, however, that Dr. Green had seen the work in *Dunglison's Library* in the latter part of the year 1839, which, from the introduction to his work, it is evident he did not, it would not help the case of Dr. Reese, for Dr. Green was cauterizing the larynx, according to his peculiar method, even before this period, as will be seen by referring to the proceedings of the New York Medical and Surgical Society in Sep-

tember, 1840, as I have already stated. The three black crows of Dr. Reese, therefore, are resolved into something even more infinitesimal than the homœopathic shadow of a black crow.

Dr. Reese says that I confess to have been in happy ignorance of the work of Trousseau and Belloc, either French or English, until I was enlightened by Dr. Green, as I falsely surmised him to have been. I said no such thing. This is a fair specimen of the misrepresentations which Dr. Reese seems to make unconsciously, for it would be cruel to suppose that he would wilfully pervert the truth, and we shall have all due charity for him, inasmuch as the force of habit is sometimes quite unconquerable. I did say, however, that I doubted whether Dr. Reese had ever heard of the publication of Trousseau and Belloc's work in this country until it was brought into notice by the recent work of Dr. Green, and I had a good and substantial reason for making such remark. I now feel it to be my duty to make known that reason, in order to administer a little wholesome rebuke to my opponent, and although he may "wince," as does the child under the rod, yet in the end he will be benefited, inasmuch as he will learn "the salutary lesson," to use his own words, "of never undertaking to enlighten the public on subjects of which he is ignorant." I have reference to the notorious fact, known not only in New York, but also in Boston, and other places, that within a year past, Dr. Reese has stated distinctly and emphatically, that it was utterly impossible to apply medicinal solutions to the interior of the larynx. I do not make this assertion, as a matter of course, without being able to prove it by the most respectable and unimpeachable authority. Hence it will be seen how very familiar Dr. Reese must have been with the work of Trousseau and Belloc, to say nothing of the reviews of Dr. Johnson, and the writings of Hippocrates; and we would advise him, therefore, not to accuse others of being ignorant of any portion of our medical literature, until he himself is fully "posted up in the progress of his own science." In conclusion, I may well exclaim with Lear:—

"Get thee glass eyes,
And, like a scurvy politician, pretend
To see the things thou dost not."

Boston, March, 1847.

M.

P. S.—Since the above was written, I have been informed by the editor of this Journal, that it is an established rule, which he was obliged long ago to adopt, not to publish any article, as a general thing, of a controversial character, without the name of the writer being attached; and, in deference to him, as I do not wish to violate any salutary rule of the press, nor ask for a privilege which is not granted to others, I cheerfully subscribe my name, allowing my communication to remain as it was originally prepared.

M. MATTSON.

MASSACHUSETTS MEDICAL COLLEGE—DR. JACKSON'S REMARKS.

[Communicated for the Boston Medical and Surgical Journal.]

At the meeting after the close of the Medical School, March 1st, Dr. Bigelow remarked, that insensibility to pain, produced by inhalation of sulphuric ether vapor, was at the present time creating much attention throughout the civilized world. He hoped that no ether would be discovered sufficiently strong, to render them insensible to the merits of its original suggester.

Dr. C. T. Jackson being called upon by Dr. Bigelow, said that he had little new to communicate to the gentlemen present, since they had enjoyed frequent opportunities of witnessing the effects of ethereal inhalation during the past winter, and were already aware of its power in the prevention of pain during surgical operations. He would, however, take this opportunity of vindicating his own and his country's claims, to the honor of this discovery.

He was aware of the pretensions advanced by others, but he believed that they had not been countenanced by the scientific world. The Academy of Sciences of France had received this discovery, and acknowledged its value, and had recorded it as emanating from America. They had set aside, at once, the claims of pretenders, and had acted justly and honorably.

He had already given to the public an account of the original experiments which he had made, on the effects of ether vapor. He would only re-assert, as he can prove by the testimony of others, that he discovered that insensibility to pain was produced by inhalation of sulphuric ether vapor, and that he communicated the fact to one of his pupils in February, 1846, and requested him to try the experiment when he had a tooth extracted.

In the latter part of September last, he communicated this discovery to a dentist of this city (Mr. W. T. G. Morton), and requested him to administer the ether to one of his patients, with the assurance that it would produce insensibility, and that the experiment would be free from danger, if his directions were followed. He regarded himself as responsible for the results of the first experiments, which were made at his suggestion, and by his advice. He next requested that dentist to go to the Massachusetts General Hospital, and ask Dr. Warren's permission to administer the ether vapor to a patient, about to undergo a surgical operation.

He regretted that any misunderstanding should have arisen concerning this discovery. He was willing to allow great credit to others for their enterprise and zeal in promoting its introduction, and for skill in improving his originally simple apparatus. He did not see any reason why each party should not be willing to rest content with what they had done.

It would certainly be unwarrantable for the miner, who carried Davy's safety lamp into the fire damps of a mine, to dispute the claims of its original inventor; for he received that instrument already proved to be efficient, with the assurance that it would guide him in safety amid the explosive gases of the mine.

CASE OF RUPTURE OF THE VAGINA, AND ESCAPE OF THE FŒTUS INTO THE ABDOMINAL CAVITY.

[Communicated for the Boston Medical and Surgical Journal.]

ON Wednesday evening, March 17th, 1847, at 11 o'clock, I was called to attend upon Mrs. M. S., aged 28, who was in labor with her third child. On arriving at her residence, I found that labor commenced about 9 o'clock same evening. Pains regular, and at intervals of from ten to twenty-five minutes, but not severe, and destitute of those peculiar features which characterize the *first stage* of labor. At the first examination, I was unable to determine the presentation, in consequence of the presence, in the vagina, of the membranes, filled with the waters—but by pressure of the finger upon the descended sac, it was ruptured, though very resisting, and an immense quantity of water escaped, affording such relief to the patient, that she slept during the intervals of several successive pains. My second examination assured me that it was a natural vertex presentation. The labor progressed steadily but slowly, for four or five hours, the head advancing but very little during the time. It was deemed advisable to ask in another physician, which was done. All things appearing right, and the strength of the patient continuing firm, counsel did not think it necessary to remain, and left, with the assurance that he would return, if necessary, at any moment.

Nothing further occurred until 5 o'clock, P. M., the pains continuing, but with greater regularity and power. At 5 o'clock, during a most violent contraction of the uterus, there was a sudden and entire cessation of all pain, but without any of those symptoms which denote the occurrence of so grave an accident as that which subsequent examination proved to have occurred. No unusual anxiety of countenance, or restlessness, or jactitation, gave token of the fearful condition of things. After waiting half an hour, no pains occurring, and the head of the fœtus receding, counsel was called in. The successful use of the forceps failed in consequence of the position of the head. Other attempts to remove the fœtus also failed. The case was pronounced to be *rupture of the uterus*. The patient sank rapidly, and at half past 6 o'clock, on Friday morning, expired.

Examination, made — hours *post-mortem*. The fœtus was found within the abdominal cavity, together with the placenta. The uterus well contracted, and containing but a small quantity of coagula. At the anterior and inferior surface of the uterus, there appeared, as it remained in situ, an extensive lateral rupture, which, at first, appeared to be in the uterus itself, but on further inspection, proved to be in the vagina, at its attachment to that organ. There was extensive and general inflammation of the peritoneum, and also of the peritoneal coat of a portion of the small intestines. Further examination was not made, being unnecessary. (I might add that the fœtus was very large, the head being unusually ossified and unyielding. At the second confinement, of the patient, which occurred in Boston, she was told by her physician that she would not live through another. Such an opinion, gratuitous, of course, is re-

garded by men of good sense, to be very foolish and unnecessary, to say the least, and often injurious to the peace of the patient, however correct the prognosis.)

J. A. T.

Worcester, March 19th, 1847.

THE BOSTON MEDICAL AND SURGICAL JOURNAL.

BOSTON, MARCH 31, 1847.

Election of Medical Professors by Conours.—An important chair in the Medical College in Boston, is now well known to be vacant, by the resignation of Dr. Warren, who has sustained the professorship of Anatomy and Physiology, with distinguished ability and faithfulness, for an unusually long period. A query is running through the medical ranks, in regard to his successor. Who is the man?—is the question. The opinion prevails generally that he has been long ago selected, and that the influence of one or two will determine any medical appointment at the University, against any competitor who might be so presumptuous as to aspire to a place of such professional value. Whether this is true or not, we cannot pretend to decide. It is certain, however, that the fortunate person who obtains the appointment, in the ordinary way in which elections are made at all the academical and medical institutions in New England, will have the reputation of having been elevated by strong friends behind the screen;—and however meritorious he may be as a man, he will be contrasted with many greatly his superiors, but who had no friends at court, and whose attainments, therefore, and peculiar qualifications for lecturing acceptably and instructively, without great pillars of family strength or wealth, must edge their way through life, and market their knowledge at retail, instead of shining in conspicuous departments of science, for which both by nature and education they are pre-eminently qualified. Were the corporation of the University to throw the doors wide open, and invite the whole profession to contend honorably for the prize by conours, what a glorious triumph it would be for intellect! How probable it is that the election would fall on some individual whose transcendent powers are either unknown, or not generally acknowledged by the public. And what an acquisition, too, would it be to a School, that should in all coming ages be the great and unrivalled medical focus of the Northern States.

It is quite unnecessary to particularize the character of the conours in France, or the effect the system has in developing the wonderful resources of the human mind. There is a prize to be gained worth contending for, when a professorship is there vacant. Men of comparative obscurity, having an opportunity to manifest their fitness for the duties, are permitted to exhibit their claims before a competent tribunal of judges, who are unswayed by those multiplied interests that are secretly made to bear upon a candidate's case, who silently glides into a fat position, *a la New England*. There are said to be professorships in some medical schools in our country, where the endowment was made, provided the present incumbents were appointed to them. It was a regular piece of family economy, giving a relative a life annuity and college honors combined; in other words, with-

out it, they would have been nothing in society, and even now, they are but make-weights, or niche-fillers, like the baked monks of St. Bernard, for show in a faculty catalogue. Some persons ride through life on the shoulders of their friends, as Sindbad the Sailor did on the neck of the Old Man of the Sea, and look back upon the less fortunate of their fellow beings who are trudging on in the rear, indulging in feelings that are presumed to have agitated the benevolent Uncle Tobey, when he said to the fly, "go, poor devil, the world is large enough for thee and me." Being made, and making one's self, are very distinct affairs. History presents an unerring array of testimony to show that all the truly grand achievements in literature, science and the arts, to say nothing of war, were accomplished by men who battled with adversity, and struggled against prejudices, but who at last triumphantly inscribed their own names on an imperishable tablet of universal fame.

No one conversant with the policy that usually actuates the managing spirits of institutions where profit or honor are at the disposal of a select board of gentlemen, supposes that the old scheme of suddenly making something out of nothing, will be readily abandoned. However disinterested some appointments may appear to the staring eyes of the spectator public, a large number of them, at least, in the colleges of medicine in this country, have had their origin in an out-of-sight selfishness, difficult at all times to expose, but the trick is invariably detected in the sequel. We all have our favorites as well as relatives, and it is a weakness, perhaps, of humanity, that a sense of justice to the coming phalanxes of untaught students, is lost sight of in the gratification of pushing a friend into a spot where an indirect advantage will accrue to us from his position.

All the hard sayings, often unjust surmises, inuendoes and expressions of vexation or regret, which a numerous, jealous, ambitious profession may be supposed to manifest when, in important appointments, merit is smothered in a napkin, and brass is gravely declared, by the *Senatus Academicus*, to be gold, would be entirely obviated by the simple, generous establishment of the system of election by concours. If the American journals would heartily advocate this excellent test of the qualifications of candidates for professorships, in the medical schools of the United States, a change in the present mode might ultimately be effected; and then, but never till that important revolution transpires, will the great body of our medical teachers, lecturers and professors, vie in true greatness and brilliancy with those in the schools of France.

Ethereal Intoxication.—An aged medical man, now in an insane hospital, twenty-five years ago was affected with neuralgic pains, which were always allayed by inhaling the vapor of sulphuric ether. For many years since, he has been in the constant habit of inhaling the vapor for the sole purpose of producing an agreeable excitement, which eventually was nothing short of intoxication. The gentleman who communicates this circumstance to us, has no doubt that the permanent insanity which apparently now characterizes the case, may have been induced by this curious but vicious method of inebriation.

New Hampshire Medical Association.—A new society, full of vitality, has commenced its existence in the Granite State, under an act of incorpo-

ration, and is to meet annually at Concord, the first Wednesday in January, for the transaction of business. A good reputation, eschewing secret remedies, and qualifications that would gain a fellowship in the State Society, are necessary to obtain an introduction to this select association. The plan of a daily record book of cases, recommended on the sixth page of the pamphlet containing the Constitution and By-Laws, is worthy of being extensively imitated by all medical practitioners. How much that would be of incalculable value to society, is lost by physicians of experience, simply because they neglect to make memoranda of what they are daily seeing, hearing and doing, for the sick and infirm.

Hospital in Roxbury.—Dr. B. E. Cotting has addressed the authorities in the neighboring city of Roxbury, upon the urgent and growing necessity for a hospital. His reasonings are cogent, and, to us, convincing. There should be some edifice besides an almshouse, for strangers, and poor persons, temporarily confined by sickness and accidents. A site sufficiently spacious and commodious can be purchased far cheaper now than at any future period. All good citizens should sustain Dr. Cotting in this admirable and philanthropic suggestion. Of 150 patients in the Almshouse the past year, 100 of them were from Ireland.

Philadelphia Association for Medical Instruction.—From an examination of the annual announcement of this Association, the course of instruction appears to be not only methodical, but thorough, and therefore well calculated to advance pupils in medical studies. There are nine instructors, who give lectures on anatomy, physiology, materia medica and therapeutics, medical chemistry, obstetrics, &c., surgery, legal medicine and pathology. This is the fifth season, and the courses have shown an increasing prosperity. The lectures commence the first of April and continue till the end of October.

Dr. Cross's Appeal to the Medical Profession.—A second edition of a pamphlet, entitled "An Appeal to the Medical Profession of the U. States, together with an analysis and refutation of the 'Statement of facts in relation to the expulsion of James C. Cross from the University of Transylvania', by James Conquest Cross, M.D.," &c., has been received. The author says in the preface, that the first edition having been exhausted, a demand for it induces him to put forth another and larger one. Referring to his accusers, with whom he had formerly been officially associated, he says—"If the reader should conclude a more infamous trio of scoundrels is to be found on record, then I am wholly ignorant of history." Gentlemen wishing to familiarize themselves with the rise and progress of a serious quarrel, in which actors of distinguished reputation are the dramatis personæ, are invited to examine our copy.

Yellow Springs Water-cure Establishment.—A company, recently organized, have made ample accommodations for hydropathic treatment, at the above place, not far from Philadelphia. Patients are required to carry with them "two large woolen blankets; one pair linen, and one pair coarse

cotton sheets ; long pieces of linen or cotton cloth for bandages, and two comforters." By taking, in addition, a knife, fork and spoon, an iron pot, and a shin of beef, they might make themselves quite comfortable, on their arrival, independent of the institution. The lithographic view of the premises shows that very good taste has been exercised by the proprietors in the buildings, and the arrangement of the grounds. Hydropathic hospitals are multiplying much faster than those having a pecuniary interest in them, notwithstanding their vaunted philanthropy, seem to desire. Any person having an obscure farm, difficult of access, in a remote region, may command a price by turning it into a Græfenburg.

Transylvania Medical College.—It appears, by the catalogue, that there were two hundred and five students in attendance on the recently closed lectures, representing thirteen States. Sixty-eight were admitted to the degree of M.D., on Friday, February 5th. At the same time the honorary degree was conferred on Samuel B. Field of Kentucky, Wm. H. Wilson of Illinois, Wm. T. LeGrand of Mississippi, and D. M. Lipscomb of do.

National Medical Convention.—It affords us much pleasure to notice, by our exchanges, the increasing interest which the near approach to the time for the second meeting of this convention has produced. Already a large number of the medical colleges and societies of the country have appointed delegates to represent them in that body.

Medical reform is the watchword of the day, and we hope it will be communicated to all the outposts, until it becomes the rallying cry of every association and individual of the profession.

This is the age of *progress* ; let not the liberal science of medicine be lagging in the rear ! We hope that every respectable medical institution in the country will be fully represented in the convention in May next.—*New York Medical and Surgical Reporter.*

Lithotomy.—Professor Dudley has recently performed the operation for stone in several instances, and with his usual success. He has now performed the operation on *one hundred and eighty-nine persons*, of whom one hundred and eighty-four have recovered. The last case from which we received particular information, recovered in less than a week. Twelve hours after the operation, the urine passed by the wound for the last time, and union by the first intention took place perfectly.

This remarkable success has not been attained by a selection of cases ; on the contrary, we have the best authority for the declaration, that he has operated on nearly every case that has been presented. He performs the lateral operation, and always employs the gorget.—*Western Lancet.*

New Methods for using Castor Oil.—The mildness and certainty of operation of this cathartic give it peculiar advantages in the treatment of many diseases ; very often, however, its tendency to produce vomiting prevents it from being employed. To remedy this inconvenience, M. Parola proposes the substitution of an extract, an ethereal and an alcoholic tincture of castor-oil seeds, for the oil itself. The result of his experiments on him-

self, and on numerous sick and convalescent individuals, is as follows :—1st. That the ethereal and alcoholic tinctures have a purgative action four times as strong as the oil obtained by expression, and that they are not so apt to produce vomiting, nor so irritant, as the ordinary oil. 2d. That these new preparations remain unalterable for a long period without reference to climate or season. 3d. That the ethereo-alcoholic extract possesses a purgative action comparatively weaker than the marc or pulp from which it is extracted, proving that the seeds contain a principle which is insoluble in alcohol or ether. 4th. The advantage of the new preparations, so far as relates to their not causing vomiting, is easily explained by the smallness of the dose in which they are administered.—*Dublin Journal*.

Hospital for the Insane in Indiana.—It is gratifying to us to communicate, as it must be to every member of the profession, that rejoices in the alleviation of human suffering, to learn, that Indiana has now in progress of erection a large and elegant hospital for the insane. It is calculated to accommodate 140 or 150 patients, with the officers, attendants and servants necessary for its management. The plan of its internal arrangements, made out from an examination of similar institutions, by our colleague, Dr. Evans, who is Superintendent of the institution, is said to be one of the best yet devised; combining more conveniences, with less expense, than is generally to be found in such establishments. Although 300 feet long, with contemplated additions of 100 feet more to each end, being three and four stories high, there is scarcely a foot of room in the whole establishment that will not be usefully and appropriately occupied. The provisions for the comfort and appropriate treatment of the patients, are ample and most admirably arranged.—*Illinois and Indiana Med. and Surg. Journal*.

Willoughby Medical Institution.—The Faculty of Willoughby Medical School are now giving, as we are informed upon good authority, their last course of lectures.

To a large number of the physicians in this region, it may appear surprising that a school, which numbered upwards of 160 students in the class of last season—which has so respectable and active a Faculty—which has its graduates scattered through the West—should suspend operations. To those, however, acquainted with the situation of the town of Willoughby, and the great disadvantages it labored under, it has long been obvious that a school at that place could only be supported by the excessive and constant efforts of its faculty and friends. The reason is obvious: it is the proximity of the place to Cleveland, where the advantages afforded to student are, or will be, every way superior. Cleveland is the natural centre of business for Northern Ohio, and individual efforts will not long contend against natural and constantly operating causes in any department of human affairs. Another cause has, we doubt not, contributed to discourage the Faculty at that place; it is the almost unlimited adoption of the credit system, whereby, with the gratification of lecturing to a large class, professors are forced to submit to the inconvenience of empty pockets.—*Ibid*.

Medical School in Michigan.—We learn that efforts are now being made for the establishment of a medical school, near the central point of the

State of Michigan. The persons concerned in it are gentlemen of highly respectable characters, and all that is required for perfect success of the enterprise, is prompt and vigorous action.—*Ibid.*

Lunatic Asylum in Missouri.—The question of establishing a lunatic asylum in our State has been agitated in the Legislature. It is time that something should be done in Missouri for this unfortunate class of beings. Should the Legislature pass a law for this purpose, would it not be proper to locate the institute in the immediate vicinity of St. Louis? The opportunity which would thus be afforded to the students of the two medical schools established here, of making themselves familiar with a class of disease proper to such an institution, is of itself a cogent reason for the selection of this place. The State should do all in its power to facilitate the instruction of medical students, to whose care the lives of her citizens, generally, are hereafter to be entrusted. Besides, St. Louis is the central point from whence radiate all the principal thoroughfares leading through the most populous sections of the country; it would consequently be easier, at all times, to transport patients here than elsewhere.—*St. Louis Medical and Surgical Journal.*

Castleton Medical College.—We understand that the Spring Session of lectures in Castleton Medical College is as usual attended by a large class of students.

Discovery of the Effects of Ether.—Dr. R. H. Collyer is again claiming, in London, credit for having first made known the peculiar effects of sulphuric ether, without seeking pecuniary compensation for the discovery. The editor of the *Lancet* thus alludes to his claims:—"Dr. Collyer should produce something like proof of his liberality. In the first instance, proof should be given that the discovery of the production of insensibility by ether, and its application to surgery, were *his* to give. As yet, nothing of this kind has been supplied, and until it is, the writer must be content to belong to the class of jump-up-behindlers."

TO CORRESPONDENTS.—Several papers, which have been on file for publication several weeks are again deferred. One on medical reform, by Dr. Sutton, of Kentucky, and one from Dr. Hawley, of Connecticut, have been received. The criticisms of "M. D." on an article inserted in the *Journal* last year, are not of sufficient practical importance to render their insertion, at this late day, expedient.

MARRIED.—In Boston, Edmund E. Braun, M.D., of Charlestown, to Miss Sophia H. Arnold, of Chamblay, Canada.

DIED.—In Pittsfield, Me., Dr. Simonds, a revolutionary pensioner.—At Walpole, N. H., Dr. Abraham Holland, 96. Three physicians have died in that town within a year, at the ages of 90, 96 and 97.—At South Wales, Erie Co., N. Y., Dr. Ira G. Watson, 56.—At Rome, Amos Binney, M.D., of Boston.—In St. Johnsbury, Vt., Dr. Morrill Stevens, 52.—At Nashville, N. H., Dr. Timothy Hilliard, 60, a graduate of Harvard University.

Report of Deaths in Boston—for the week ending March 27th, 53.—Males, 23—females, 30—Stillborn, 5. Of consumption, 9—lung fever, 10—typhus fever, 6—scarlet fever, 1—rheumatic fever, 1—marasmus, 3—pleurisy, 1—tumor, 1—hooping cough, 1—teething, 1—child-bed 2—intemperance, 1—bilious colic, 1—scrofula, 1—inflammation of the lungs, 1—convulsions, 4—dropsy on the brain, 3—inflammation of the bowels, 1—old age, 3—brain fever, 1—debility, 1.

Under 5 years, 21—between 5 and 20 years, 4—between 20 and 40 years, 12—between 40 and 60 years, 11—over 60 years, 5.

Lexington Medical Society Prizes.—The Lexington Medical Society have resolved to offer a prize of Fifty Dollars, or a Gold Medal or Piece of Plate of that value, at the option of the successful competitor, for the best Thesis submitted for the Degree of Doctor of Medicine, in the Medical Department of Transylvania University, for the Session of 1847-8. Those competing for this prize are at liberty to select the subject of the Thesis.

The Society also resolved to offer an *Annual Prize* of Fifty Dollars, or a Gold Medal or Piece of Plate of that value, for the best Original Essay, on a subject to be selected by a Committee.

In accordance with the above resolutions, the Committee propose, for 1847, a Prize for "*The best account of Continued Fever, as it prevails in any of the States out of New England.*" The Continued Fever of the Eastern States has been very carefully studied and very fully described. It is found to correspond exactly to the *Typhoid Fever* of France; and it is by that name that the disease is now generally called. The same disease is known to prevail extensively in some of the Middle, Western and South-Western States; but throughout these regions it has not yet been very fully or thoroughly studied. This prize is offered as one means of remedying this defect.

The Committee also propose, for 1848, a prize for "*The best account of the several forms of Periodical or Malarious Fever, in the United States.*"

New York Academy of Medicine.—A meeting of this association was held on Wednesday evening, and the following gentlemen were elected delegates to the general convention to be held in Philadelphia in May next:—V. Mott, F. C. Stewart, D. M. Reesc, Ed. Delafield, J. O. Pond, O. S. Bartles, R. S. Kissam, J. C. Bliss, Charles D. Smith, Jared Linsly, H. D. Bulkley, E. L. Beadle, Moore Hoyt, W. H. Van Buren. A charge preferred against a member for holding a consultation with a homœopathist was referred to the committee on ethics. Dr. Mott read before the society a paper on operative surgery.

Medical Miscellany.—Fifty-three students were graduated doctors in medicine at the recent close of the lecture term at Cincinnati.—The New York Observer says that there are thirty victims to Millerism in the Insane Asylum at Utica.—A young lady of Portland, Maine, long afflicted with the dropsy, was tapped a few days since, and six gallons of fluid, weighing fifty-two pounds, were taken from her. In another case of dropsy, nine pounds in substance was taken from a patient.—A woman is said to be now living in Moscow, who has attained the age of 168 years. When at 122, she married her fifth husband.—Dr. Dan Foote, of Berlin, N. Y., has been arrested and held to trial for the murder of his wife.—Dr. Underhill, the celebrated horticulturist, recently stated in New York, that he had three acres of Catawba grapes, and seventeen of the Isabella. The profit on the sale of that excellent fruit, is far larger than those who purchase, suspect.—Dr. Ellis removed an ounce of laudanum from the stomach of a young woman, in Cabotville, Mass, five hours after she took it, and although she was perfectly stupid and insensible, her life was saved.—Thirty-three students were admitted to the degree of M.D. at the late commencement of the Pennsylvania Medical College.—No. 8, of Vol. III., of the Am. Journal of Science and Arts, contains much valuable matter.